

*** RETURN TO HILLCREST ***

SAINT PAUL DIVISION OF PARKS AND RECREATION S'MORE FUN PROGRAM

2009 REGISTRATION CHECK OFF

Child's Name _____

_____ \$35.00/per child non-refundable registration fee
* To be checked off by staff *

_____ Registration Form

_____ Fee Contract, duplicate sent home

_____ First week's tuition, \$145.00 a week and/or \$32.00 a day
* To be checked off by staff *

_____ Emergency Information Form

_____ Emergency Information Card

_____ Medication Permission Forms (if needed)

_____ Release Form

_____ Parent Handbook

_____ Credit Card Authorization Form

**SAINT PAUL PARKS AND RECREATION
2009 HILLCREST S'MORE FUN PROGRAM
REGISTRATION FORM
(PLEASE PRINT CLEARLY)**

A \$35.00 non-refundable registration fee per child must accompany this application.

CHILD'S NAME _____ NICKNAME _____ School _____

ADDRESS _____ Zip _____

AGE _____ BIRTH DATE _____ SEX: MALE _____ FEMALE _____

CHILD RESIDES WITH: ☐ Both Parents ☐ Mother ☐ Father
☐ Stepfather ☐ Stepmother ☐ Guardian

MOTHER/GUARDIAN'S NAME _____

STEPFATHER'S NAME _____

ADDRESS _____ ZIP _____

E-MAIL ADDRESS _____

HOME PHONE () _____ CELL Phone() _____

BUSINESS NAME () _____ BUSINESS ADDRESS _____

FATHER/GUARDIAN'S NAME _____

STEPMOTHER'S NAME _____

ADDRESS _____ ZIP _____

E-MAIL ADDRESS _____

HOME PHONE () _____ CELL PHONE () _____

BUSINESS NAME _____ BUSINESS PHONE () _____

BUSINESS ADDRESS _____

**PERSONS AUTHORIZED TO PICK YOUR CHILD UP FROM S'MORE FUN.
PHOTO I.D. IS REQUIRED BY THE STAFF PRIOR TO RELEASING YOUR CHILD**

NAME	ADDRESS	PHONE
_____	_____	() _____
_____	_____	() _____
_____	_____	() _____

List any present condition that might result in an emergency and correct plan of action:

List any special needs of your child (IE. disabilities, allergies, etc):

(You may be contacted by the Divisions Adaptive Recreation Staff to learn more about your child and to determine the support, if any, that your child may need. We ask for at least two weeks notice for accommodation requests. In Some cases, accommodations may take longer than two weeks.)

Language, other than English, your child speaks or understands:

Special interests and favorite activities of your child:

Particular behavior difficulties or potential problems or disabilities staff should be aware of:

Additional information that would help staff gets acquainted with your child:

List names and ages of brothers, sisters, stepbrothers, stepsisters:

In relation to your child, what are your expectations of S'MORE FUN?

SIGNATURE _____ DATE _____

**SAINT PAUL PARKS AND RECREATION
2009 HILLCREST S'MORE FUN PROGRAM
EMERGENCY INFORMATION FORM**

Child's Name _____

Address _____ Zip _____

Home Phone () _____ Birth date _____

Mother's Name _____

Business Phone () _____ Ext. _____ Cell Phone () _____

Father's Name _____

Business Phone _____ Ext. _____ Cell Phone () _____

Parent/Guardian to contact in case of an emergency:

If my child becomes ill and I cannot be reached, please call:

1. Name _____ Phone () _____

Address _____ Relationship _____

2. Name _____ Phone () _____

Address _____ Relationship _____

3. Name _____ Phone () _____

Address _____ Relationship _____

Name of Doctor/Clinic: _____

Address _____ Phone () _____

Medical Insurance Company and Policy Number for ten weeks, with on unpaid vacation week allowed. Part time status is defined as follows: Three or more days a week for ten weeks, with one unpaid vacation week allowed.

FEE PAYMENT POLICIES: The cost is \$145.00 a week and/or \$32.00 a day. Any bank service charge for returned checks will be charged to the parent. Multiple child discount (Full time status only):

1st child \$145.00/week, 2nd child \$135/week, 3rd child \$125/week.

Tuition is due on the first day of the week that your child:

Signature _____ Date _____

**SAINT PAUL PARKS AND RECREATION
2009 HILLCREST S'MORE FUN PROGRAM**

RELEASES

CHILD'S NAME _____

PROGRAM

I agree to abide by the terms and conditions of the City of Saint Paul Parks and Recreation S'MORE FUN Program policies, of which I have received a copy, governing the enrollment of my child.

Signature _____ Date _____

FIELD TRIPS

I agree to permit my child to participate in the field trips sponsored by the S'MORE FUN Program. Trips planned will be posted.

Signature _____ Date _____

MEDICAL EMERGENCIES

In the case of a life-threatening emergency involving my child, I authorize the S'MORE FUN program to use the Paramedics to transport my child to the hospital emergency room. The child will be transported at the expense of the parent.

Signature _____ Date _____

ACCIDENTAL POISONING

In the event of accidental poison ingestion, I understand that the S'MORE FUN staff will contact the Poison Control Center

Signature _____ Date _____

SUN SCREEN

My child has permission to apply sun screen. Staff has permission to apply sun screen to my child.

Signature _____ Date _____

ANECDOTES AND PICTURES

I grant permission to the S'MORE FUN Program to use my child's name, pictures and anecdotes for the purpose of educating the public to the services available.

Signature _____ Date _____

Field Trip EMERGENCY INFORMATION CARD

Child's Name _____

Address _____ Zip _____

Home Phone () _____ Cell Phone () _____ Birth date _____

Mother's Name _____

Business Name _____ Business Phone () _____ Ext. _____

Father's Name _____

Business Name _____ Business Phone () _____ Ext. _____

Parent/Guardian to contact in case of an emergency:

Name _____ Home Phone _____

Business Phone _____ Ext _____

Signature: _____ Date: _____

**SAINT PAUL PARKS AND RECREATION
HILLCREST S'MORE FUN PROGRAM
2009 PARENTS FEE CONTRACT**

Child's Name _____ Registration Fee: (paid) _____ (receipt#) _____

Please circle all of the days you child will be attending, staff will fill in all other information

Week	Dates	Days	Due Date	Cost	Paid	Check- Cash Credit Card	Receipt #
1	June 15-June 19	M T W TH F					
2	June 22 – June 26	M T W TH F					
3	June 29- July 2	M T W TH					
4	July 6-10	M T W TH F					
5	July 13-17	M T W TH F					
6	July 20-24	M T W TH F					
7	July 27-31	M T W TH F					
8	August 3-7	M T W TH F					
9	August 10-14	M T W TH F					
10	August 17-21	M T W TH F					

DATES/TIMES: Hillcrest S'more Fun program begins Monday June 15th and ends Friday, August 21st.
S'more Fun will be closed Friday July 3rd. S'more fun opens at 7:00 AM and closes at 6:00 PM.

ENROLLMENT STATUS: Full time status is defined as follows: Five days a week for ten weeks, with one unpaid vacation week allowed.
Part time status is defined as follows: Three or more days a week for ten weeks, with one unpaid vacation week allowed.

FEE PAYMENT POLICIES: The cost is \$145.00 a week and/or \$32.00 a day. Any bank service charge for returned checks will be charged to the parent. Multiple child discount (Full time status only): 1st child \$145.00/week, 2nd child \$135/week, 3rd child \$125/week.

Tuition is due on the first day of the week that your child attends the program. For example, if your child attends the program Monday-Friday, your tuition is due on Monday. If your child attends the program Wednesday-Friday your tuition is due on Wednesday.
A \$5.00 per day late charge will be added to your fees if tuition is late.

If your child is absent from the program, our budget demands that we must still collect a fee for that day.
This includes sick and impromptu vacation days.

Field trip payments are due on the day of the field trip. A \$5.00 per day late charge will be added to you fees if the payment is late. If your child is absent from the program, on a field trip day, our budget demands that we must still collect the field trip payment.

S'more Fun closes at 6:00 PM. If your child has not been picked up by then, a late fee of \$10.00 will be charged for every five minutes past closing time. For example, if your child is picked up at 6:02 PM., you will be charged a \$10.00 late fee. A child will not be allowed to return to the program until the fee is paid. * THIS WILL BE ENFORCED*

ADVANCE NOTICE FOR VACATION AND ATTENDANCE CHANGES: Parents may remove their child from the program for up to one week and not be charged a fee, providing a two week advance notice is given.

AGREEMENT: I have read the S'more Fun parent handbook, and I agree to pay all of my child's tuition.

Signed: _____ Date: _____

